FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5

1. Name and Address of Reporting Person* **Broadfin Capital, LLC**

(First)

(Last)

(Middle)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden response: 0.5

7. Nature of Indirect Beneficial Ownership (Instr. 4)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

	ons may contin ion 1(b).	ue. See		Fil								ies Exchan mpany Act			34			hours	per re	esponse:	0
1. Name and Address of Reporting Person* Broadfin Healthcare Master Fund Ltd				A	AVADEL PHARMACEUTICALS PLC [AVDL] (Check all a Di Otto Check al									all appoint and all appoints all all all all all all all all all al	onship of Reportin Il applicable) Director Officer (give title below)		X 10% C	wner (specify			
(Last) (First) (Middle) 20 GENESIS CLOSE ANSBACHER HOUSE, SECOND FLOOR, 1344					3. Date of Earliest Transaction (Month/Day/Year) 01/03/2017										belo	w)		below)		
(Street) GRAND CAYMAN E9 KY1-1108				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City)	(Si	tate) ((Zip)																		
			le I - No	_		_			_		Dis	posed o				lly	1		1		I
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) Ordinary Shares 01/03/2					ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transaction Code (Instr. 8)		5)			(A) or 3, 4 an	d	Secur Benef Owne Repor	5. Amount of Securities Beneficially Owned Following Reported		wnership m: Direct or Indirect nstr. 4)	7. Nature of Indired Beneficia Ownersh (Instr. 4)	
				3/2017	2017				Code D ⁽¹⁾	v	Amount 4,394,4	([(A) or (D) Price		(Instr		action(s) 3 and 4)		D ⁽²⁾		
Ordinary	- Silares	Ta	able II -				rities	Acar			ispo	sed of,					vned		<u> </u>	D. 7	
	1.			(e.g., p	uts, o		warr	ants,	, o	ption	s, c	onvertib	le se	curi							1
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr 8)				E>	6. Date Exercis Expiration Date (Month/Day/Ye		e	Amou Secur Under Deriva	Title and mount of ecurities inderlying erivative ecurity (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)	
				Co		v	(A)	(D)		ate xercisal		Expiration Date	Title	or	ount mber ares	r					
I		Reporting Person* <u>Care Master F</u>	und Lte	<u>d</u>																	
l	ESIS CLOS		(Mid																		
ANSBA0	CHER HOU	JSE, SECOND I	FLOOR,	1344		_															
(Street) GRAND CAYMA		E9	KY	1-1108																	
(City)		(State)	(Zip)	ı																	
l	nd Address of ER KEVI	Reporting Person* ${\color{red}N}$																			
(Last) (First) (Middle) C/O BROADFIN CAPITAL, LLC 300 PARK AVENUE, 25TH FLOOR		dle)																			
(Street) NEW YO	ORK	NY	100	22																	
(City)		(State)	(Zip)																		

300 PARK AVENUE, 25TH FLOOR								
(Street) NEW YORK	NY	10022						
(City)	(State)	(Zip)	_					

Explanation of Responses:

1. On December 31, 2016, Flamel Technologies S.A. ("Flamel") merged with and into the Issuer. As a result, Flamel's outstanding Ordinary Shares were canceled and exchanged on a 1:1 basis for newly issued ordinary shares of the Issuer. The reporting persons are filing this Form 4 solely to report dispositions of Flamel Ordinary Shares as a result of the merger. The reporting persons have made no market sales or purchases in connection with the dispositions reported in this Form 4.

2. The Ordinary Shares are held in the account of Broadfin Healthcare Master Fund, Ltd., a private investment fund managed by Broadfin Capital, LLC and may be deemed to be beneficially owned by Kevin Kotler, managing member of Broadfin Capital, LLC. Each of Broadfin Capital, LLC, Broadfin Healthcare Master Fund, Ltd. and Kevin Kotler disclaim beneficial ownership of the reported securities except to the extent of his or its pecuniary interest therein, and affirmatively disclaim being a "group" for purposes of Section 16 of the Securities Exchange Act of 1934, as amended.

Broadfin Healthcare Master

<u>Fund, Ltd., By: /s/ Kevin</u> <u>01/06/2017</u>

Kotler, Director

<u>/s/ Kevin Kotler</u> <u>01/06/2017</u>

BROADFIN CAPITAL, LLC

By: /s/ Kevin Kotler, Managing 01/06/2017

Member

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.